



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

020728.0101PTUS

PATENT

Applicant	:	Gopal)	Group Art Unit: 1636
)	
Reissue Appl.	:	09/404,979)	
)	
Filed	:	September 22, 1999)	Information Disclosure
)	Statement
For	:	PEPTIDE-MEDIATED)	Under 37 C.F.R. § 1.98
		GENE TRANSFER)	
)	
Examiner: McKelvey, T.)	

TRANSMITTAL LETTER

Honorable Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Enclosed for filing in the above-identified application are:

- (x) An Information Disclosure statement.
- (x) A list of U.S. patents submitted for consideration to the Office.
- (x) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment of fees associated with this communication to Deposit Account No. 50-2228.



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PTO/SB/21 (04-04)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Application Number	09/404,979
	Filing Date	September 22, 1999
	First Named Inventor	T. Venkat Gopal
	Art Unit	1636
	Examiner Name	McKelvey, T.
Attorney Docket Number		020728.0101PTUS

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kellie L. Carden, Reg. No. 52,696 Patton Boggs LLP
Signature	<i>Kellie L. Carden</i>
Date	October 14, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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